

Role of Nurses in Nutrition Care in Hospitals in Srinagar City (Jammu and Kashmir, India)

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Abstract

The nurse is the hub of all activities in a hospital, centered on the patient, who makes the patient get more individualised care. The present study was carried out in hospitals of Srinagar city (Jammu and Kashmir) to know the role of nurses in nutrition care of patients. A total of 11 hospitals registered under the Directorate of health services (Srinagar) capital of Jammu and Kashmir, India were included in the study. Hospitals were coded as (H1-H11) in order to maintain confidentiality. Data was collected using interview schedule through observation and discussion as well. The sample consisted of 62 nurses, representing 2% from each hospital. It involved gathering of both qualitative and quantitative data. A scoring pattern was formed to evaluate the nutrition care of patients by nurses. Senior staff nurses were interviewed taken from each hospital. Recommendations were developed after the conclusion was derived from the study. Results revealed that it was seen that most of the hospitals, nurses assisted patients only when the patient asked for help at meal time. Patients were not monitored by nurses at meal times and they were looked after by their own attendants. The nurses did not feel that it was their responsibility to ensure or oversee meal service. They responded that this was the job of stewards or delivery boys. It appeared that assisting patients for meals was not considered a major responsibility of nurses and this task was mostly left to the patients' attendants. Only at H7, nurses performed their role in nutrition care. At most of the hospitals, patients' food intake was overseen by their attendants as indicated by 97% nurses. The scoring pattern revealed that out of 11 hospitals, nurses at H7 were performing most jobs for patient's nutrition care and thus received a score of 2. In all other hospitals, a score of 0 was received as nurses were found to be involved only to a minimal extent, if at all, with nutrition care of patients, indicating that their involvement needs to be increased to improve the quality of care. It involved gathering of both qualitative and quantitative data. A scoring pattern was formed to evaluate the nutrition care of patients by nurses. Senior staff nurses were interviewed taken from each hospital. Recommendations were developed after the conclusion was derived from the study. They were however convinced of the need for implementing the recommendation and expressed that they would attempt to bring out the changes such as having a dietetic department and dieticians in hospitals.

Keywords: Nurses; Nutrition care; Hospitals; Patients; Food service; Nursing supervisors; Senior nurses

Introduction

Nurses are an important part of the nutrition care process and have a vital role to play in it. Importance of food in the care and treatment of hospital patients has been championed by the nursing profession for many years. Hospitals these days receive patients of varying nature, with different cultural background, with varied food habits and with different diseases. The clinicians and dietitians have to meet the requirements of patients as per their nature of diseases, their nutritional status and tackle any problems related to the underlying pathological conditions [1]. Providing good nutrition to patients in hospitals has become a primary focus in many nutrition and health delivery services and the impact of adequate food on patient outcome is now well documented. Nutrition education needs to be imparted in nurses, paramedical workers, medical personnel and patients. Many patients who are ill in hospitals or other care settings, and have poor appetites or an impaired ability to eat, are at risk of developing under nutrition. It is therefore, not surprising that hospital nutrition is considered the most supportive part in treating disease [2]. Nurses play a central role in patient care. Nurses have a day to day responsibility for ensuring that patients are given appropriate diets adapted to their

health and needs. Moreover, they mostly have the additional responsibility of recording, assessing and reporting the patient's food intake and their nutritional status. It has long been recognized that nursing care which promotes nutritional intake when and as appropriate, can aid recovery from illness and enhance the quality of life of patients. There has been growing concern that nurses do not pay sufficient attention to the nutritional needs of patients or clients [3]. The importance of nutrition services in hospitals is realized and documented theoretically. Nutrition services in most hospitals in our country do not receive the due they deserve. Very little Indian data is available on quality of nutrition services in hospitals. The present study therefore was mainly aimed to know the role of nurses in nutrition care in hospitals in Srinagar city (Jammu and Kashmir, India). Nutrition services have improved with increased recognition of nutrition and dietetics over the past few years; this has possibly occurred in the large metro cities and large multispecialty hospitals. For a general assessment of nutrition services nurses were included, to get a holistic overview into the nutrition care services and identify the positive aspects and lacunae needing attention in nutrition care. Nurses from wards and senior incharge nurses and supervisors were therefore included to know if they participated in the nutrition care in any manner and provided any assistance to patients with their meals. The present study revealed that patients' complaints/feedback were dealt

with mainly by various categories of nursing staff, although the registrar and receptionists were also performing this task.

Methodology

The present study was carried out in hospitals of Srinagar city (Jammu and Kashmir) in order to meet the objective of the study. A total of 11 hospitals registered under the Directorate of health services (Srinagar) capital of Jammu and Kashmir, India were included in the study. Data was collected using interview schedule through observation and discussion as well.

Pre-testing

In the present study, the tool developed (interview schedules) was pre-tested and necessary modifications were made prior to use for data collection. Based on the pre-testing, modification of the interview schedule was made by the deletion of the inconsistent, ambiguous and lengthy items and the addition of essential items. The order of questions was also modified and some questions were rephrased and these were then used for data collection.

The present study was carried out in hospitals of Srinagar city (Jammu and Kashmir) in order to meet the objective of the study. A total of 11 hospitals registered under the Directorate of health services (Srinagar) capital of Jammu and Kashmir, India, were included in the study. Data was collected using interview schedule through observation and discussion as well.

Sample

Information was collected from nurses in registered hospitals (n=11), if they were involved directly or indirectly with regard to

Nutrition provider	care	Number/percentage per hospital	Total number	Mode of selection
Nurses		2%	62	About 2% of nurses employed in each hospital on a full time basis.

Table 1: Sample size and mode of selection of nutrition care providers at various hospitals providing food in patients (n=11).

Tools and techniques used included

- Observation and discussion
- Interview schedules

Interview schedules: The interview method of collecting data involves presentation of oral –verbal stimuli and reply of oral verbal responses. An interview has its flexibility. An interviewer administered survey is more accurate and obtains more returns than a post self-completion survey. The advantage of an interview is that it can elicit information from a respondent that covers a long period of time in a few minutes. Also, a face to face interaction assists in the establishment of rapport and a higher level of motivation among respondents. It is a useful method when exhaustive data is required on a small number of complex topics [4]. The interviewer can pursue in-depth information around the topic. Interviews may be useful as follow-up of certain respondents to information obtained from questionnaires, to further investigate their response [5].

To meet the objectives of this study, an interview schedule was developed for nurses in order to obtain their viewpoint on the role of nurses in nutrition care of patients.

nutrition care of patients. All hospitals registered with Directorate of Health Services in Srinagar (Jammu and Kashmir), were included in the study.

Selection criteria

Informed consent and willingness of nurses involved in nutrition care of patient's to participate in the study formed the basis of sample selection for the study.

The selection criterion for the hospitals included in this study was as follows:

Inclusion criteria

All registered hospitals, government, private and autonomous hospitals which had an Inpatient Department (IPD) were selected.

Exclusion criteria

Hospitals which offered only Out Patient Department (OPD) facilities were not considered for the study

Sample size

Senior staff nurses and nursing supervisors were taken from each hospital. The sample consisted of 62 nurses, representing 2% from each hospital (Table 1).

Scoring Pattern for Nutrition Services

A scoring pattern was developed for nurses to know their role in nutrition care of patients. An overall scoring pattern ranging from 0-2 was used. Individual questions asked under different aspects received a score of 1 if the response was 'Yes' and 0 if the response was 'No'. An overall score of 2 was given for $\geq 2/3$ rd jobs performed; a score of 1 for $1/3$ rd and $\leq 2/3$ rd and 0 given for $<1/3$ rd of jobs performed aspects and facilities. Overall scores received by nurses at various hospitals showed their role performed by nurses and provide pointers for developing the recommendations for improving nutrition services in Srinagar.

Data Management

This included consolidation of data gathered, data analysis in terms of numbers, percentages, table and figures.

Results and Discussion

Importance of nurses in nutrition care of patients

Knowledge of nutrition enables the nurse to make sound assessments, to know when to make appropriate referrals, and to work effectively as a team member with dietitians. Nurses and dietitians must work together in developing and accessing care plans to provide adequate nutrition for the patient. Nurses have more “hands-on” time

with patients than anyone else involved in their care. They observe the patients’ physical and mental condition, listen to their problems, and fill most of their needs. Nurses are in a unique position to observe food intake, assess nutritional status, evaluate the response and attitudes of the patients to diet therapy and, support the dietary teaching and regimen ordered (Table 2) [6]. When facilities/clinics do not have a dietician, a nurse shares the responsibility with a physician for meeting the patients’ nutritional needs and dietary counselling [7].

S:No	Responsibilities of Nurses
1	Nurses and dietitians must work together in developing and accessing care plans to provide adequate nutrition for the patient.
2	Nurses are in a unique position to observe food intake, assess nutritional status, evaluate the response and attitudes of the patients to diet therapy and support dietary teaching and regimen ordered.
3	When facilities / clinics do not have a dietician, a nurse shares the responsibility with a physician for meeting the patients' nutritional needs and dietary counseling

Table 2: Responsibilities of nurses in nutrition services.

The results depicted showed that, out of 11 hospitals, nurses at H7 were performing jobs for patients nutrition care and thus received a score of 2, whereas all other hospitals received a score of 0 as they were

fulfilling none of the responsibilities in terms of patients nutrition care in terms of patient’s nutrition (Table 3)..

Responsibilities	Scores received by Nurses for their role in nutrition services											Total
	H1	H2	H3	H4	H5	H6	H7	H8	H9	H10	H11	
1	0%	0	0	0	0	0	1	0	0	0	0	1
2	0	0	0	0	0	0	1	0	0	0	0	1
3	0	0	0	0	0	0	1	0	0	0	0	1
Total	0	0	0	0	0	0	3	0	0	0	0	
Overall Score* based on number of jobs performed	0	0	0	0	0	0	2	0	0	0	0	
Overall score: *for ≥ 2/3rd jobs performed a score of 2 given; for 1/3rd and <2/3rd a score of 1 and <1/3 a score of 0 given												

Table 3: Scores received by nurses for their role in nutrition services.

General profile of nurses

The present study showed that 4 nurses were males and 58 were females from the samples selected (H1 to H11). Out of 62 nurses, 29% of nurses were senior supervisors and 71% were senior staff nurses (Figure 1). Their ages ranged from 21-50 years. Sixty three percent nurses were graduates in nursing and 37 had a Post Graduate Diploma in nursing and also were graduates in nursing. The nurses worked on shift basis, the day time shift being from 10 am to 5 pm and the night shift from 5 pm to 9 am.

Role performed by nurses in nutrition care of patients in the present study

In view of the role of nurses in the nutrition care process, nutrition education must be imparted to nurses, paramedical staff and medical personnel [8]. Among the hospitals surveyed, in three hospitals (H9, H10, H11), nurses ordered the meal for patients telephonically as prescribed by the doctors. It was the job of nurses at only these three

hospitals to ensure that patients received the correct meal or not. At hospitals H1, H2, H3, H4, H5, H6, H7, H8, no role was performed by nurses in ordering meals for patients as these hospitals followed a different set of system for meal service. Nurses assisted patients only when the patient asked for help at meal time. Patients were not monitored by nurses at meal times and they were looked after by their own attendants.

Other information which was elicited from the nurses in the study was regarding their views on the person accountable for meal service to patients and assistance given at meal times. Information was also obtained on monitoring of food consumption of patients and dealing with complaints/feedback regarding catering issues.

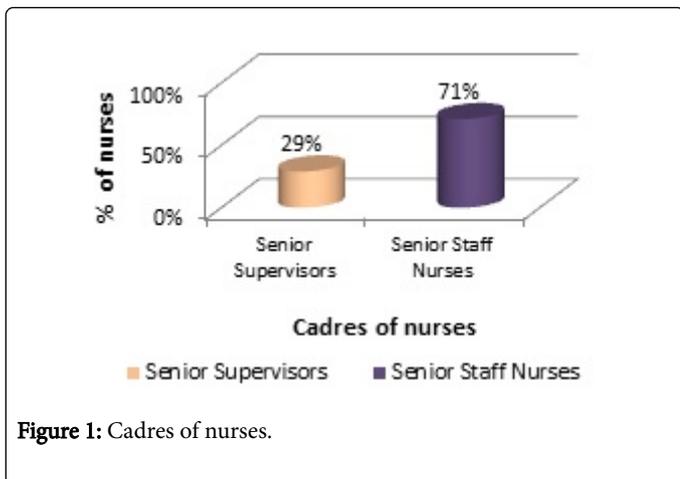


Figure 1: Cadres of nurses.

Response of nurses to person accountable for meals service

In this study, the nurses did not feel that it was their responsibility to ensure or oversee meal service. They responded that this was the job of stewards or delivery boys as seen in Figure 2. At hospitals H1, H2, H3, H4, H5, H6, H7, stewards ensured that patients receive the correct meal as responded by 89% nurses, while 11% nurses responded that the delivery boy was accountable for the patients' meals (H8, H9, H10 and H11).

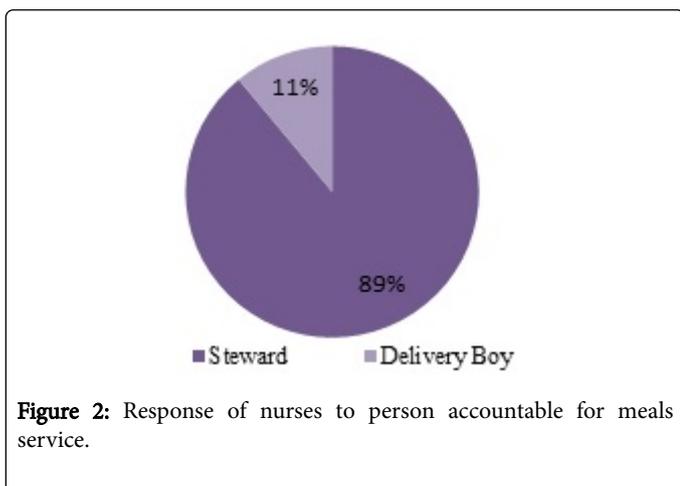


Figure 2: Response of nurses to person accountable for meals service.

Assistance provided to patients at meal times: The response of nurses to assistance provided to patients at meal times is presented in Figure 3. As seen from the figure, 61% of nurses reported that the patients' attendants assisted them at meal times and 39% stated that nursing aides assisted the patients for meals. It thus appears that assisting patients for meals was not considered a major responsibility of nurses and this task was mostly left to the patients' attendants. Nurses should ensure assistance at meal times to patients including positioning them appropriately and safely for the meals [8].

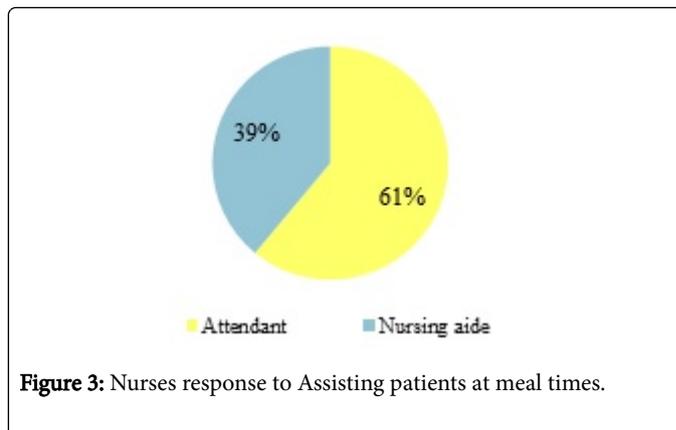


Figure 3: Nurses response to Assisting patients at meal times.

Monitoring of food consumption of patients by nurses: As mentioned earlier, nurses are in a unique position to observe food intake and have a role in food monitoring and food consumption. However in the hospitals at Srinagar, the nurses did not perform this function except for 2 nurses at H9. At most of the hospitals, patients' food intake was overseen by their attendants as indicated by 97% nurses (Figure 4).

Dealing with complaints/feedback of catering issues: The present study revealed that patients' complaints/feedback were dealt with mainly by various categories of nursing staff, although the registrar and receptionists were also performing this task. As depicted in Figure 5, the senior nursing staff was the main person involved as reported by 33 nurses (53%), followed by nursing supervisor and then the nursing superintendent. At H11, no nursing staff but the receptionists looked after complaints about food.

All the complaints were verbally communicated to the nurses, who noted down all complaints and then forwarded them to the kitchen manager or the hospital administrator. Thus, the nurses were also involved only to a limited extent with nutrition care of patients, and their involvement needs to be increased to improve the quality of care.

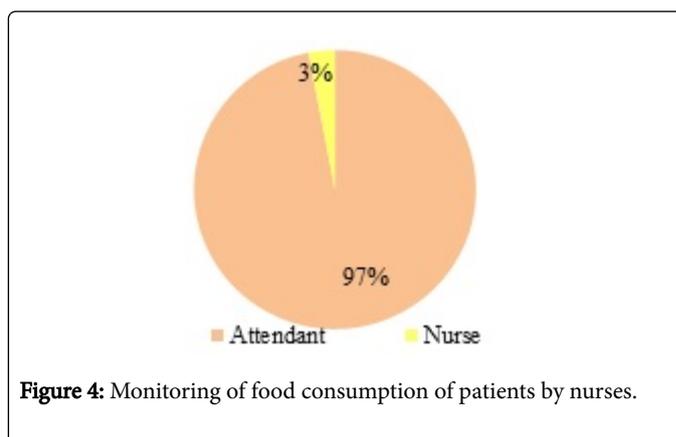
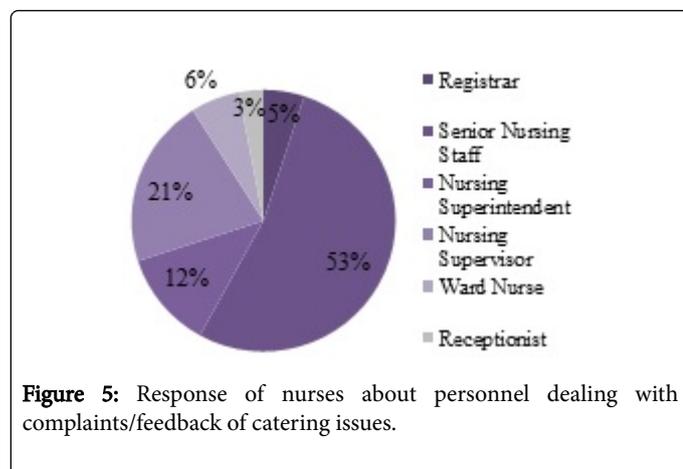


Figure 4: Monitoring of food consumption of patients by nurses.



Conclusion

From the study, it may be concluded that some aspects were positive and there were some others that needed improvement. Overall scenario showed that nurses were not involved in the nutrition care of patients. It was seen that age range of nurses were 21-50 years. Seventy one percent of nurses were senior staff nurses and 29% were senior supervisors. Educational background of nurses was graduates and post graduate diploma in nursing. In terms of nutrition care of patients, at some hospitals, nurses ordered meals for patients telephonically in the food service unit. At other hospitals, nurses were not involved in ordering meal service. Here steward was responsible for ordering and serving meals for patients. Few other hospitals, a delivery boy performed the job. During meal time, whenever patients needed assistance, it was given by the patient's attendants and nursing aids. It was also observed that food was monitored by nurses at all hospitals. Food related complaints were noted down and was forwarded them to the kitchen manager/dietician/canteen manager or the hospital administrator.

The scoring pattern revealed that out of 11 hospitals, nurses at H7 were performing most jobs for patient's nutrition care and thus received a score of 2. In all other hospitals, a score of 0 was received as nurses were found to be involved only to a minimal extent, if at all, with nutrition care of patients, indicating that their involvement needs to be increased to improve the quality of care.

Recommendations

Based on the results of the study and aspects covered, it was observed that the hospitals needed to be sensitized so that nurses also take a part on better nutrition and patient care. Recommendations were developed in an attempt towards improving the hospital nutrition services to optimize nutrition care for patients for improving nutrition services at Srinagar hospitals. Seven broad areas were included in the recommendations. These recommendations in the form of a leaflet

were given to nurses. One feedback form and a recommendation leaflet given to each one of them to know their views on these recommendations. At H7, the stakeholders did not feel the need to respond as their nutrition services were adequate. From the feedback of nurses, it emerged that the response was positive from all the hospitals. The only major constraints expressed by the respondents in positions of authority were financial in nature. They were however convinced of the need for implementing the recommendation and expressed that they would attempt to bring out the changes such as having a dietetic department and dieticians in hospitals.

Regarding recommendations, senior staff nurses and Nursing Staff from each hospital were interviewed. They felt and agreed to the fact that nutrition care plays an optimal part of patient care and they expressed the following views:-

- It helps to keep the body healthy.
- It aids in better recovery.
- It helps to have good mental and physical strength.
- Medicines work well when patients take proper nutrition.

At all the hospitals, nurses felt that these recommendations would improve the nutrition services in hospitals as proper monitoring of diets, nutrition counselling and proper therapeutic diets would be available to patients. Knowing about the importance of nutrition in healthcare, nurses were willing to take up the recommendations with the authorities for the betterment of patients' nutrition care. They also thought that all the recommendations were feasible and could be implemented with proper consideration and effort. They also expressed that if there was a dietician available, they would be willing to work as a team.

Acknowledgement

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References

1. Korschevar LH, Terrell ME (1985) Food service planning layout equipment. 2: 66-71.
2. Brogden BJ (2004) Clinical skills: Importance of nutrition for acutely ill hospital patients. Br J Nurs 13: 914-920.
3. Green S, Jackson P (2002) Nutrition and nurse education. Nurs Times 98: 34-59.
4. Burns RB (2000) Introduction to research methods. (4th edn), Sage Publications.
5. Carter McN(1999) General Guidelines for Conducting Interviews. Minnesota.
6. Sherer K, Davis JR (1994) Applied nutrition and diet therapy for nurses. (2nd edn), WB Saunders Company.
7. Directorate of Health Services (DGHS) (1989) Guidelines for standardized hospital diets. 1-16.
8. Wilson R, Lecko C (2005) Improving the nutritional care of patients in hospital. Nurs Times 101: 28-30.